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CONFIRMATION NO. 2319

<b>SERIAL NUMBER</b> 10/565,621	<b>FILING OR 371(c) DATE</b> 07/25/2006 <b>RULE</b>	<b>CLASS</b> 438	<b>GROUP ART UNIT</b> 2812	<b>ATTORNEY DOCKET NO.</b> (BIF 116044 US)	
<b>APPLICANTS</b> Hubert Moriceau, Saint-Egreve, FRANCE; Bernard Aspar, Rives, FRANCE; Jacques Margail, La Tronche, FRANCE; <i>RSP</i>					
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/FR04/01858 07/15/2004 <i>RSP</i>					
<b>** FOREIGN APPLICATIONS *****</b> FRANCE 0308865 07/21/2003 <i>RSP</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 09/04/2006</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Allowance</i> Acknowledged <i>Examiner's Signature</i> <i>Initials</i>		<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 40	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> Brinks Hofer Gilson & Lione PO Box 10395 Chicago, IL60610					
<b>TITLE</b> Stacked structure and production method thereof					
<b>FILING FEE RECEIVED</b> 2030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		